Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

01/350 -321

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			108				1	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			\( \alpha \) minus 20=		* 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 mi	nus 3 =	* \phi'			X42=		OR	X84=		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	750	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1)				(Colur		) (Column 3)		SMALL ENTITY		OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		<u>                                     </u>		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JLNPLE DEF	PENDENT	CLAIM		J	+140=		OR	+280=		
	100							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	<u> </u>	_ `			•								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	] ]	X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	*** PENDENT CLAI		=	4	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)	_						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	] [	X\$ 9≈		OR	X\$18=		
	Independent	*	Minus	***		<u> </u>	] }	X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		<b>↓</b> L			UH			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE													
	The "Highest Num	ber Previously Pa	id For" (Total o	r Independ	ent) is the	highest numb	er fol	and in the app	propriate box	c in co	lumn 1.		